

POSITION	ID NO.	DATE
CLASSIFIER	10	10-16-97
EXAMINER	68904	1-6-98
TYPIST		
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

BEST AVAILABLE COPY

INDEX OF CLAIMS

Claim	Date
1	11-14-97
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SYMBOLS

- ✓ Rejected
- = Allowed
- (Through number) Canceled
- Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected